

I claim:

1. A method of reducing mortality and morbidity after myocardial infarction, comprising administering to a patient in need thereof, a compound selected from the group consisting of GLP-1, GLP-1 analogs, GLP-1 derivatives, and pharmaceutically-acceptable salts thereof, at a dose effective to normalize blood glucose.
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2. The method of Claim 1, wherein the compound is administered intravenously.
3. The method of Claim 1, wherein the compound is administered subcutaneously.
4. The method of Claims 2 or 3, wherein the administration is continuous.
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5. The method of Claim 4 wherein the rate of administration of the compound is between 0.25 and 6 pmol/kg/h.
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6. The method of Claim 5 wherein the rate of administration of the compound is between 0.6 and 2.4 pmol/kg/h.
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7. The method of Claims 2 or 3 wherein the intravenous administration is intermittent.
8. The method of Claim 2 wherein the compound is administered intravenously and also administered by another parenteral route.
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9. The method of Claim 8 wherein the other parenteral route is the subcutaneous route.
10. The method of Claim 1 wherein the compound administered is GLP(7-36) amide, or a pharmaceutically-acceptable salt thereof.
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11. A method of reducing morbidity and mortality after myocardial infarction, comprising, administering a compound that exerts insulinotropic activity by interacting with the same receptor, or receptors, with which GLP-1, GLP-1 analogs, and GLP-1 derivatives interact in exerting their insulinotropic activity.
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12. A method of reducing morbidity and mortality after myocardial infarction, comprising, administering a compound that enhances insulin sensitivity by interacting with the same receptor, ~~or~~ receptors, with which GLP-1, GLP-
5 1 analogs, and GLP-1 derivatives interact to enhance insulin sensitivity.

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